Governor's State Employee Medal of Valor



Special Act / Special Service Award Nomination Package

State of California
Department of Personnel Administration
2011

Program Information

The Governor's State Employee Medal of Valor Award is the highest honor the State can bestow upon its employees and is awarded to individuals who have performed an extraordinary act of heroism above and beyond the call of duty to save the life of another person or State property. In many instances, these individuals have risked their own lives to save another. The Special Act and Special Service awards are honorary and consist of a certificate, citation, medal and lapel pin.

A **Special Act (Gold)** is an extraordinary act of heroism by a State employee extending far above and beyond the normal call of duty or service, performed at great risk to his/her own life in an effort to save human life. This act may entitle the employee to a gold medal. Examples: An employee rescues a victim from a burning vehicle or burning house; an employee rescues an attempted suicide victim; an employee rescues a driver from a vehicle submerged in icy waters.

A **Special Service (Silver)** is an act of heroism by a State employee extending above and beyond the normal call of duty or service performed at personal risk to his/her safety to save human life or State property. This act may entitle the employee to a silver medal. Examples: An employee attempts to stop traffic on an icy road during a snow storm and seeks assistance for the rescue of a victim; an employee rescues a canine police officer which is considered State property.

To be eligible for an award, the nominee must be a State employee. Employees are nominated by their departments and the awards are presented annually at a ceremony in Sacramento, California.

The incident may occur on or off duty and must be substantiated with documentation validating the special act and approved by your director or commissioner.

For questions, please contact DPA's Merit Award Program at 916-324-0522.

Award Nomination Instructions

Please read and follow these instructions carefully. Failure to provide requested information and documentation will result in the return of your nomination and may delay timely processing for this year's Ceremony.

The deadline to submit a nomination is August 1, 2011. Departments are encouraged to submit nominations prior to the deadline. Departments assemble and approve the nomination and direct it to DPA for final review. DPA reviews and approves/denies nominations on behalf of the Governor, contacts department directors/commissioners when nominations have been approved/denied, and serves as the lead for all planning and logistics of the awards ceremony.

The nomination package must include:

 Special Act / Special Service Award Nomination (DPA 012) – Completed with all documentation attached and signed/approved by department's director/commissioner. Instructions for completing this form follow.

- Draft Citation The citation is a summary of the heroic act and is printed and provided to the award recipient and read at the ceremony. Departments are required to submit a hard copy of the draft citation with the nomination package and an electronic copy must be emailed to kari.ehrman@dpa.ca.gov. The format for the citation is as follows:
 - Page set-up: 8 ½ x 11 sheet of paper with 1" margins (top, bottom, left, and right)
 - Font: Arial, Size 12Spacing: Double spaced
 - Length: Maximum 1 and 1/2 pages (sorry, no exceptions)

A sample of a draft citation is attached.

Instructions for Completing the Special Act / Special Service Award Nomination Form (DPA 012)

1. Department Information

Department name – List the name of your department or agency.

Director/Commissioner – Provide the name, title, address, phone, fax, email, and cell phone or pager number for your department's director/commissioner. This information is needed for communications relating to the awards, their participation at the ceremony, etc.

Public Affairs/Communications Director – Provide the name, title, address, phone, fax, email, and cell phone or pager number of your department's Public Affairs or Communications Director. This information will be provided to the Governor's Press Office to coordinate media contact about or with awardees.

Departmental Nomination and Awards Ceremony Coordinator – Please provide the name, title, address, phone, fax, email, and cell phone or pager number of the individual that DPA can work with for this nomination and the award ceremony.

2. Nominee Information

Name of Nominee – Provide the name of the nominee as he/she would like it to be read on the certificate, citation, ceremonial programs, press releases, etc. Because a number of these documents are signed by the Governor, it is critical that you verify the correct spelling, whether they want middle initial included, etc.

Title and Classification – Provide the title and classification of the nominee at the time of the incident.

Current Title and Classification – If the nominee has been promoted or changed their position, please also provide his/her new title, classification and department and/or region.

Division or Region – Indicate the division or region where the nominee worked at the time of the incident.

Work address, city, zip – Provide the work address of the nominee. This information will be used to determine the nominee's legislative representative so they may be invited to attend the ceremony.

Telephone Number – Provide the work office and cell phone numbers (including area code) of the nominee.

3. Requested Award

Please indicate which award (Special Act-Gold or Special Service-Silver) for which you are recommending the nominee receive.

4. Incident

Date of Incident – Verify the exact/correct date of the incident.

Time of Incident – Time may be the approximate hour, i.e., 3 am or 4 pm. Do not use military time.

Location of Incident – Please provide the exact location of the place where the incident occurred, including the name of the city in/near the incident and any pertinent references to the location. Example: Highway 49 in El Dorado County or 40 miles west of Los Angeles.

Conditions at time of incident (environmental hazards, weather) – Please describe the conditions of the location or weather so we can gain a full understanding of the conditions during the rescue. For example, landslide, rocks rolling down, bridge, mountain, car on fire, unable to see the passengers. Was the weather foggy, snowing, blizzard-like conditions, raining with cars sliding around?

Detailed description of the incident and rescue (or attempted rescue) and the risk the nominee faced in performing the special act – Provide a complete description of the incident and rescue (or attempted rescue), detailing the precise nature of the risk the nominee took in performing the special act and the method he/she used. Example: Without regard to his own safety, the nominee ran down the hill and attempted to pull the individual(s) from the helicopter.

Clarify how the nominee's act surpassed normal job expectancy – Check the appropriate box that best describes the heroic act your nominee performed and then provide us with a statement on why this act surpassed his/her normal job expectancy. Example: The nominee was not a fire fighter and was not expected to place his life on the line, however, he broke down the door of the burning house to rescue five children who were alone in the house.

Length of rescue time – Did it take the nominee two minutes or two hours to rescue the victim?

Outside assistance – Were other individuals or agencies involved in the rescue and what aid was received by the nominee in performing the special act? Provide the name(s) of those giving assistance.

Name and contact information for person(s) rescued – Provide the name, address, and phone numbers of individuals rescued, as they may be asked to attend the awards ceremony to further honor the nominee by being recognized at the ceremony.

Physical effect of incident / rescue to nominee and the individual(s) rescued – What physical effect did this special act have on the nominee and those rescued? If injured, provide details on the nature of the injuries and how long they were disabled. If death resulted, state cause of death.

What documents have you attached to substantiate this nomination? (Check and attach all that apply).

Investigating police, fire, or other emergency agency reports
Eyewitness reports
Newspaper articles
Internal Investigation/Report
Citation (copy attached and electronic copy emailed to kari.ehrman@DPA.ca.gov)
Other (please describe)

5. Department Approval

Nominations must be signed by your department's director or commissioner.

Please send completed Award Nomination Package to:

Department of Personnel Administration Benefits Division / Merit Award Program 1515 S Street, North Building, Suite 400 Sacramento, CA 95811-7258

CITATION FOR A HEROIC ACT

Performed by

BRIAN SCOTT BUSHEY Officer

California Highway Patrol

On November 3, 2006, at approximately 10:00 p.m., California Highway Patrol Officer Brian Scott Bushey was on patrol in rural Alpine County on State Route 89 when he responded to a call of a collision involving an overturned vehicle in an adjacent creek. Upon arrival, Officer Bushey made his way down the embankment to the vehicle where he observed a Toyota 4Runner still running on its left side and partially submerged in a flowing creek. Inside was a female in the driver seat thrashing frantically in an attempt to keep her head above the water, with her left arm pinned between the 4Runner and the creek bottom. Officer Bushey originally thought about utilizing his patrol vehicle's winch to tow the 4Runner out of the creek, however, this was not an option due to the icy conditions of the roadway. He entered the submersed vehicle and crawled into the passenger area behind the driver's seat to assist the panicked driver in keeping her head above the water. During this effort, Officer Bushey stood in frigid, waist-deep water and gave reassurance to the woman that she would be rescued. Officer Bushey remained in this position for nearly 45 minutes until fire personnel were able to safely raise the vehicle and allow the extrication of the victim from the 4Runner.

Officer Bushey's actions during this rescue were responsible for saving the life of another.

The State of California takes great pride in presenting Officer Brian Scott Bushey this Gold Medal of Valor for his extraordinary act of heroism extending far above and beyond the normal call of duty.

Governor's State Employee Medal of Valor Special Act / Special Service Award Nomination

DPA 012 (Revised 2011)



Please carefully read the award nomination instructions in the Special Act/Special Service Award Nomination Package before completing this form. The following information is required for all nominations. If you fail to provide the requested information your nomination may be returned, which may delay award processing.

1. DEPARTMENT INFORMATION			
Department Name:			
Name of Director/Commissioner:	Title:		
Street address:	City, State, Zip Code:		
Phone Number:	Fax:		
Email:	Cell Phone/Pager:		
Name of Public Affairs/Communications Director:	Title:		
Street Address:	City, State, Zip Code:		
Phone Number:	Fax:		
Email:	Cell Phone/Pager:		
Name of Departmental Nomination/Awards Ceremony Coordinator:	Title:		
Street Address:	City, State, Zip Code:		
Phone Number:	Fax:		
Email:	Cell Phone/Pager:		
2. NOMINEE INFORMATION	·		
Name of Nominee:	Title and Classification (on date of incident):		
Division or Region:	Current Title and Classification (if different than above):		
Work Address:	City, State, Zip Code:		
Phone Number:	Cell Phone/Pager:		
3. REQUESTED AWARD			
Please check the award you are recommending the nominee receive:			
Special Act (Gold) Special Service (Silver)			
4. INCIDENT			
Date of Incident:	Approximate time of Incident (do not use military time):		
Location of Incident:			

Detailed description of the incident and rescue (or attempted rescue) and the risk the nominee faced in performing the special act/special service (attach additional paper if necessary):			
Check the box that best describes the heroic act your nominee performed an	d then provide a statement on how this act surpassed his/her normal inh		
expectancy.			
The nominee greatly risked his/her own life in an effort to save human life. The nominee's actions extended above and beyond the normal call of duty or service and risked his/her safety to save human life or state property.			
Statement on how the act surpassed normal job expectancy:			
Length of rescue time:	Outside assistance:		
	No Yes (if yes, provide names below)		
Name:	Department or Agency:		
Name:	Department or Agency:		
Name and contact information for person(s) rescued (attach additional paper	if necessary):		
Name:	Street Address:		
City, State, Zip Code:	Phone Number:		
Name:	Street Address:		
City, State, Zip Code:	Phone Number:		
Name:	Street Address:		
Name.	Sitest Address.		
City, State, Zip Code:	Phone Number:		

INCIDENT (continued)

Conditions at time of Incident (environmental hazards, weather):

Physical effect of incident/rescue to nominee and the individual(s) rescued:			
What downsels have seen the had to substantiate this grantiation (charles	and attack all that any have		
What documents have you attached to substantiate this nomination? (check	and attach all that apply):		
Investigating police, fire, or other emergency agency reports			
Eyewitness reports			
Newspaper articles			
Internal Investigation/Report			
Citation (copy attached and electronic copy emailed to kari.ehrman@dpa.ca.gov)			
	mune upu.su.gov)		
Other (please describe)			
In accordance with the provisions of Section 19823 of the Gove 599.655, I certify that the details provided herein for this nomin			
recommend a Governor's State Employee Medal of Valor Awar			
Service.			
Print Name:	Title:		
Cimatura	Dete		
Signature:	Date		
Department:	Division:		
2 oparamona.			
Phone Number:	Date:		
5. DEPARTMENTAL APPROVAL			
Print name of Director/Commissioner:	Title:		
Signature:	Date:		
	A-1/A-1		
DEPARTMENT OF PERSONNEL ADMINISTRATION APPR	Title:		
Print name of Director or Designee:	Tiue.		
Signature:	Date:		
	1		

INCIDENT (continued)